

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

# **PATENT APPLICATION FEE DETERMINATION RECORD** Substitute for Form PTO-875

Application or Docket Number  
**10/624,700**

## **CLAIMS AS FILED - PART I**

FOR	NUMBER FILED (Column 1)	NUMBER EXTRA (Column 2)
BASIC FEE (37 CFR 1.16(a))		
TOTAL CLAIMS (37 CFR 1.16(c))	minus 20 =	
INDEPENDENT CLAIMS (37 CFR 1.16(b))	minus 3 =	
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))		

SMALL ENTITY	
RATE	FEE
	\$ _____
X \$ _____ =	
X \$ _____ =	
+ \$ _____ =	
TOTAL	

OTHER THAN SMALL ENTITY	
RATE	FEE
	\$ _____
X \$ _____ =	
X \$ _____ =	
+ \$ _____ =	
TOTAL	

\* If the difference in column 1 is less than zero, enter "0" in column 2.

## **CLAIMS AS AMENDED - PART II**

**12-30-05**

	CLAIMS REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total (37 CFR 1.16(c))	<b>28</b>	Minus	<b>28</b>	=
Independent (37 CFR 1.16(b))		Minus		=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))				

SMALL ENTITY	
RATE	ADDITIONAL FEE
X \$ _____ =	
X \$ _____ =	
+ \$ _____ =	
TOTAL ADD'L FEE	

OTHER THAN SMALL ENTITY	
RATE	ADDITIONAL FEE
X \$ _____ =	
X \$ _____ =	
+ \$ _____ =	
TOTAL ADD'L FEE	

**1,22,25,28**

	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total (37 CFR 1.16(c))		Minus		=
Independent (37 CFR 1.16(b))		Minus		=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))				

SMALL ENTITY	
RATE	ADDITIONAL FEE
X \$ _____ =	
X \$ _____ =	
+ \$ _____ =	
TOTAL ADD'L FEE	

OTHER THAN SMALL ENTITY	
RATE	ADDITIONAL FEE
X \$ _____ =	
X \$ _____ =	
+ \$ _____ =	
TOTAL ADD'L FEE	

	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total (37 CFR 1.16(c))		Minus		=
Independent (37 CFR 1.16(b))		Minus		=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))				

SMALL ENTITY	
RATE	ADDITIONAL FEE
X \$ _____ =	
X \$ _____ =	
+ \$ _____ =	

OTHER THAN SMALL ENTITY	
RATE	ADDITIONAL FEE
X \$ _____ =	
X \$ _____ =	
+ \$ _____ =	

If the difference in column 1 is less than the number in column 2, enter "0" in column 2.  
 If the Highest Number Previously Paid For II THIS SPACE is less than 20, enter 20.  
 If the Highest Number Previously Paid For III THIS SPACE is less than 3, enter 3.  
 This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, on the amount of time you require to complete this form and/or suggestions for reducing this burden should be submitted to the Office of Management and Budget, Paperwork Reduction Project (7040-0042), Washington, DC 20503.

SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form call 1-800-PTO-9199 and select option 2